



1414 N 8th St., PO Box 1331
www.theHOPEchestIL.org

Pekin, IL 61555-1331
Store: 309-620-9043

Court Ordered Community Service Application Form

Date: _____ Name: _____ Date of Birth: _____
Phone Number: _____ Address: _____ City: _____ Zip: _____
Physical Limitations: _____ Occupation: _____ Required # of Hours: _____
Offense: _____ Due: _____ County: _____
Probation Officer: _____ Probation Officer contact: _____
Emergency Contact: _____ Phone Number: _____

Rules, Policies, and Guidelines

- No illegal substances or alcohol permitted on premises. We reserve the right to test for reasonable suspicion.
- Smoking is only in designated areas and only with permission from management.
- 30 minute lunch break permitted (DOES NOT COUNT TOWARD HOURS) must sign out for lunch.
- Two day notice MUST be given if a progress sheet is needed for PO or Court.
(Do not report Friday you need for Monday)
- You are responsible to complete your hours in the time given. No special privileges will be given.
- Friends/Family are NOT allowed to do hours for you.
- All applicants must comply with the orders given by management or team lead.
- You MUST make sure a member of management is approving your sign in and out- remember if they don't the hours DO NOT COUNT!!!

Applicants fall under the authority of the Director of Community Services with day to day operations and guidelines given by the store manager.

By signing below the applicant has knowledge that he/she has read the guidelines and understands the guidelines, steps, and expectations as a volunteer. The applicant will agree and comply with said guidelines in the volunteer program. It is also understood that if conduct, behavior, and/or work ethic does not meet expectations the management has the authority to terminate the involvement of the volunteer and the court will be notified.

Signature of Applicant

Signature of Director of Community Service

****ID REQUIRED****

The HOPE Chest of Pekin, a 501-c-3 Organization

